



Biz Kid\$ Camp Application

Please print

Applicant name: _____

Birth date: _____ School: _____ Grade: _____

Address: _____ Zip _____

Phone #: _____ Alternate Phone #: _____

Guardian Name & Relationship: _____

Guardian Name & Relationship: _____

Address (If different from above): _____ Zip _____

Phone #: _____ Alternate Phone #: _____

T-Shirt Size: small medium large XL 2 XL 3 XL

Will your child be dropped off or will he/she walk to the camp? (Please Circle) **dropped off** **walk**

Is your child authorized to walk home alone? (Please Circle) **YES** **NO**

If not, who is authorized to pick up your child?

Name: _____ Relationship _____ Phone # _____

Name: _____ Relationship _____ Phone # _____

List additional emergency contacts if parent/guardian (named above) cannot be reached:

Name: _____ Relationship _____ Phone # _____

Name: _____ Relationship _____ Phone # _____

Does your child have any medical conditions or special learning needs that staff should be aware of? **YES** *If yes please specify:* _____ **NO**

Has your child attended a Biz Kid\$ camp before? (Please Circle)

Yes

No

If yes, what month and year did they attend camp? _____

SESSION CHOICES (13-18 year-olds: February 15-19 **or** March 28-April 1)
(10-13 year-olds: July **or** August)

First Choice

Second Choice

Biz Kid\$ Camp Permission & Participation Agreement (please review and sign)

I deem that my child _____ is capable of participating in the Biz Kid\$ camp. In consideration of your accepting this application for participation in "Biz Kid\$", I intend to be legally bound, hereby, for myself, my heirs, executors and administrators waive and release any and all rights and claims of damages I may have against the City of Rochester, the Bureau of Recreation and their representatives, successors, and assigns for any and all injuries which may be suffered by my child. If an accident occurs, I give my permission for emergency treatment.

I give my child permission to participate in field trips to:

- City Hall for the Hot Chocolate/Lemonade Stand business competition on Wednesday of camp week. The vehicle/bus will leave the camp location at approximately 11:30 am and return at approximately 2:30 pm.
- Rochester Central Library for a small business resource workshop on Thursday of camp week. The vehicle/bus will leave the camp location at approximately 9:30 am and return at approximately 12 pm.
- Field trip on Friday of camp week. The vehicle/bus will leave the camp location at approximately 1 pm and return at approximately 2:30 pm.

I understand that he/she will be transported in a City-owned vehicle or rented bus.

I give permission to the City of Rochester to record the image and voice of my child, for purposes of the City of Rochester Department of Recreation and Youth Services.



Parent signature

Date

Code of Behavior

-  **Follow all center rules.**
-  **Show good sportsmanship** and invite others to join in.
-  **Go to staff if you need help** resolving a problem or dispute
-  **Use appropriate language and gestures** that respects the feelings of others.
-  **Respect City and private property.**
-  **Respect the decisions** of all coaches, referees and staff.
-  **Keep yourself and others safe** by not bringing weapons into the center.
-  **Demonstrate self control** to avoid hurting yourself or others.

*In order to help Recreation Staff provide a safe and nurturing atmosphere at all Recreation Centers, participants are **required** to adhere to the **Code of Behavior** to avoid suspension or other consequences.*

As a participant in the Biz Kid\$ Camp, I agree to complete all Biz Kid\$ sessions provided by the City of Rochester Bureau of Recreation and to follow the Department of Recreation and Youth Services' Code of Behavior (attached)



Child signature

Date

PLEASE COMPLETE THE APPLICATION AND THE PERMISSION & PARTICIPATION AGREEMENT AND SEND TO:

Biz Kid\$
400 Dewey Avenue
Rochester, NY 14613
Phone: 585-428-7371
Fax: 585-428-6021